

## **Application Data Sheet**

### **Application Information**

Application number::	Not Yet Assigned
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	No
Title::	IMPLANT MATERIAL
Attorney Docket Number::	2297520012.20
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	YES
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Julie
Middle Name::	Hazel
Family Name::	CAMPBELL
City of Residence::	Queensland
Country of Residence::	Australia
Street of mailing address::	181 Savages Road
City of mailing address::	Brookfield
State or Province::	Queensland
Country of mailing address::	Australia
Postal or Zip Code of mailing address::	4069
Applicant Authority Type::	Inventor

Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Gordon  
Middle Name:: Ronald  
Family Name:: CAMPBELL  
City of Residence:: Brookfield  
Country of Residence:: Australia  
Street of mailing address:: 181 Savages Road  
City of mailing address:: Brookfield  
State or Province:: Queensland  
Country of mailing address:: Australia  
Postal or Zip Code of mailing address:: 4069

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status::  
Given Name::  
Middle Name::  
Family Name::  
City of Residence::  
Country of Residence::  
Street of mailing address::  
City of mailing address::  
State or Province::  
Country of mailing address::  
Postal or Zip Code of mailing address::

**Correspondence Information**

Correspondence Customer Number:: 25227

**Representative Information**

Representative Customer Number:: 25227

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation-In-Parts	09/763,359	May 15, 2001

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Australia	PCT/AU99/00670	August 21, 1998	yes

**Assignee Information**

Assignee name:: University of Queensland of St. Lucia

Street of mailing address::

City of mailing address::

State or Province:: Queensland

Country of mailing address:: Australia

Postal or Zip Code of mailing address:: 4067